

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90184 037 ****61.25

DOCUMENT # N19616

1. Entity Name

**FIRST PRESBYTERIAN CHURCH OF SEBASTIAN,
INCORPORATED**



Principal Place of Business

1405 LOUISIANA AVE
P.O. BOX 781689
SEBASTIAN FL 32978-8689

Mailing Address

1405 LOUISIANA AVE
P.O. BOX 781689
SEBASTIAN FL 32978-8689

2. Principal Place of Business

3. Mailing Address



MOORE CR2E037 (11/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2734445

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GILTINAN, JOAN C
461 AZINE TERRACE
SEBASTIAN FL 32958**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ED Delete
NAME CLEMENT, JUDY
STREET ADDRESS 302 EASY STREET
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE ED Delete
NAME ABMA, KLAAS
STREET ADDRESS 337 EGRET CIRCLE
CITY-ST-ZIP SEBASTIAN FL 32976

TITLE ED Delete
NAME BRILLHART, CLARK
STREET ADDRESS 662 JENKINS ST.
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE ED Delete
NAME ELLISON, CARL
STREET ADDRESS 5705 GARRETT'S ROAD
CITY-ST-ZIP SEBASTIAN FL 32976

TITLE ED Delete
NAME LETRICK, BETTY
STREET ADDRESS 113 ARCADIA DRIVE
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE ED Delete
NAME KIMMEL, JOAN
STREET ADDRESS 210 DELMONTE ROAD
CITY-ST-ZIP SEBASTIAN FL 32958

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ED Change Addition
NAME KNOWLES, DAISY
STREET ADDRESS 8308 BROWN ROAD
CITY-ST-ZIP MICCO, FL 32976

TITLE ED Change Addition
NAME MARINE, NANCY
STREET ADDRESS 207 CALICO COURT
CITY-ST-ZIP BAREFOOT BAY, FL 32976

TITLE ED Change Addition
NAME SPEAR, PRISCILLA
STREET ADDRESS 518 LAYPORT DRIVE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE ED Change Addition
NAME WELLS, ROBERT
STREET ADDRESS 9785 NORTH MARINA DRIVE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE ED Change Addition
NAME FENNEL, GLORIA
STREET ADDRESS 925 GULFSTREAM AVENUE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE ED Change Addition
NAME LILGA, DONNA
STREET ADDRESS 422 ORANGE AVENUE
CITY-ST-ZIP SEBASTIAN, FL 32958

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert M. Wells ROBERT M. WELLS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-04

Date

772-589-5656

Daytime Phone #

Attachment

N19616

TITLE ED
NAME BURGESS, KEN
STREET ADDRESS PARK PLACE, 2401 KELLY DRIVE
CITY-ST-ZIP SEBASTIAN, FL 32958

ADDITION

TITLE ED
NAME CROWTHER, BRADLEY
STREET ADDRESS 8655 92ND AVENUE, VERO LAKE ESTATES
CITY-ST-ZIP VERO BEACH, FL 32967

ADDITION

TITLE ED
NAME NAFZIGER, RICHARD
STREET ADDRESS 420 CHALOUPE TERRACE
CITY-ST-ZIP SEBASTIAN, FL 32958

ADDITION
